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Title:	Interview with Joanne Hojsak, MD
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The Arthur H. Aufses, Jr. MD Archives Box 1102 One Gustave L. Levy Place New York, NY 10029-6574 (212) 241-7239 msarchives@mssm.edu INT 0355, Interview with Joanne Hojsak, MD Conducted by Angelyn Thornton, via Zoom July 30, 2020

COVID Memories: Hi, can you hear me.

Joanne Hojsak: Yes, I can.

JH: Can you hear me.

CM: Yes, I can.

- **JH:** Okay. I'm not sure if this microphone is working, but this is the headset, that was provided so..
- CM: Oh no, I can hear you.
- JH: Okay, good, good.
- **CM:** Okay, I just have some stuff to read off the top.

JH: Sure. Okay.

- **CM:** This is Angelyn Thornton, Marketing Coordinator for the Levy Library at Icahn School of Medicine at Mount Sinai interviewing via Zoom. I'm interviewing Joanne Hojsak.
- JH: Hojsak. Hojsak (Hoi-sack)
- **CM:** Hojsak. We ask that you do not disclose any personal health information regarding patients or other persons. If you do disclose your own health information, it will not be covered by HIPAA, just so you know.
- JH: Okay, okay.
- **CM:** To start off, a please tell me your name, your department and your institution.
- **JH:** Okay, so my name is Joanne Hojsak. My department is the Department of Pediatrics in the Pediatric Intensive Care Unit. So I'm a pediatric intensivist at Mount Sinai Hospital. The main hospital.
- CM: Okay, great.
- **CM:** Do you have a particular story or event that you would like to have recorded for this project.

- **JH:** It's more about the description of a day and overall day than a particular event in that day, if that makes any sense.
- CM: Absolutely. So we'll go straight to that.
- **CM:** How would you describe how COVID-19 changed your day-to-day life, both at work and at home.
- **JH:** Okay, well...let's do, let's say tied together. Right. And so, whatever happened more than anything is that work and home became more, they affected each other more closely. And so, whatever happened at work got a little bit carried home and vice versa. Right? so, I think everyone had the biggest concerns were how to balance that. How to balance the work and the home, how to keep the people at work safe, yourself safe and then therefore the people at home safe and that was probably one of the hardest things to grapple with during this whole thing. So, my day-to-day work particularly at the peak of the COVID pandemic here at Mount Sinai.
- I worked every single day in the in the pediatric intensive care unit with breaks, you know, one or two days a week, breaked by a colleague who actually came out of retirement to do it. So, the selflessness of people is unbelievable. And so, we, the day would start when it was still dark out and you basically pack up your whole, your all your stuff and you make sure that you've got all your PPE and you get to work and you're very conscious of every surface that you touched at that point, I have to say. Everything was a potential infection, just walking around. So, my little office became my little home ground and little home place. And my backpack would go in there, all my extra PPE would go in there and then I would just completely get dressed up and then go out work and really not come back during the whole day to the office. First, it would just be a nonstop kind of thing where we just work in the PICU because again you were already dressed and every time that you changed and got out of that, you basically risk contamination, too.
- So, you really just worked all day and then came back at the end of the day, kind of decontaminate yourself as best you could, change the clothes and then went off back to home. And as soon as you hit the door at home, you did the same thing again, okay? And so, every day all the clothes got changed. We hit the shower right away and so the family got really used to not really seeing me. And during that month I isolated and I was lucky enough to have a separate bedroom, so we basically just saw each other, mostly through FaceTime, okay. I would actually FaceTime dinner with my family, who was in the next room, all right. And I imagine a lot of other people did that same kind of thing. And then go to bed early and then do it again. And this became the cycle around that for the month of April. So that leads to one particular day in April, that I want to share a story about
- The people you worked with became a different one of your families and they're included a lot of people that I would not normally work with, because we needed more help. And one thing about pediatrics and the COVID areas that nobody really understood [is] how, I still don't understand how, COVID-19 affects children. So whereas absolute devastation

was going on in the adult units, without a doubt, I mean that [Guggenheim Pavilion] atrium was an intensive care unit. The Annenberg lobby was another unit and they were - you couldn't move in the hospital without having patients there.

- So no doubt that it was affecting adults, but I think very few people understood what was going on in pediatrics, because we were kind of, at that point, the children aren't really affected so just hold the fort and make sure everything stays okay. And then when it's all over we'll, we'll get back to normal and everybody will come back to pediatrics but it really wasn't. It was very, it was a small group of people left in pediatrics with a disease that we had no idea how it was going to affect the children. And it was pretty eye opening on how it did. Okay? It was without a doubt smaller numbers than the adults, by far. But then when the children were affected, they were very affected and really quite sick. And it was, I honestly think most people didn't know. So your coworkers were the only people that knew, so we became kind of a group, you know, it's, I don't want to use the word club. But, uh, really kind of a, you know, a battalion, I guess. Just where we would just come in and here we go. We could barely recognize each other with just a little strip of eyes that showed behind the face shield. But we got to know who each other was in and went through and took care of the patients.
- That one particular day I had come in. I had two critically ill children that needed procedures from the night before, both with COVID. The person who was on overnight stayed so he could help out. And then the day progressed the same way with tremendous number of illnesses going on. And then my having to actually call a mother and tell her that her five-year-old had to have a significant procedure, I guess for the risk of-I'm not going to disclose any more than that. But I had to tell the mother the child needed a significant procedure at the age of five. And the mom, having no comprehension of what I was saying, but disbelief and, you know, screaming into the phone "he's only a baby" because he was.
- And all the people that came to help out. So, the anesthesiologist from the adult side and the cardiologist from the adult side, because many of our cardiologists had gotten deployed to the adult side, so we were just this little group. And I have to say, the ultimate kindness of the people that came. The anesthesiologist brought me presents, like they brought me their all their tricks their face shields, their neck shields that they had, they had all this extra equipment that they had built for themselves, all right? And they all gave me everything. One of them gave me this, like, really nice hand cream, because our hands were completely torn up and it was just, it was actually very touching. In the midst of all of this crisis and taking care of these kids and feeling kind of alone, that all these people came with presents. And the irony of it is we would never consider that a present like the month before, right? But those were presents! So, you know, hand cream. So it was, that was a day that I just don't, I didn't forget.
- CM: Great. Yeah, that sounds. I can't imagine
- JH: Yeah.

- **CM:** Okay, so we're, we're about four months in. New York is doing much better than it was before. What is the toughest part of your day now in the situation we're in right now?
- **JH:** Reminding myself to stay vigilant. At the same time, balancing it with reminding myself that that there are lots of other things that need care and patience. And so the vigilance can't be, can't look like fear. The vigilance can't look like I don't want to go see a patient, it has to be balanced. So, you have to balance taking care of yourself as well as taking care of others, which is the same as it was when it was really at its peak, but it's easy to forget. It's easy to forget.
- **CM:** How has living through all of this made you feel now, and how do you think it will affect you going forward?
- **JH:** Hmm, so I thought about this one. And so yesterday...I teach in the medical school, so that's a whole other issue and how we're, how education, is moving forward is really a challenge. But we did a little exercise with the entry medical students yesterday through Zoom. We just basically had them kind of close their eyes for a minute and picture themselves a year ago to the date, okay, and what was going on in their lives and how things have changed, you know, and that type of thing. And so, in doing that, things were so much better in so many ways, or at least we think so. Right? But at the same point, I came to, I realized that I didn't appreciate things the way I appreciate them now.
- Okay, so that things that would make me tense back a year ago would never make me tense now. [Laughter] But back then, I know it's not like I was deliriously happy...and I think that goes along with the vast majority of people. It's not like we're all dancing in the streets and just really happy. We all had our own our issues, and our problems and our concerns and they were more, maybe a little bit more like this little tunnel vision. And they were just ours. And so it's even though it was a different time and you think, 'oh the good old days,' we didn't see him that way. That was my realization doing this exercise. And so I think things have changed now is, is it takes um...what makes me happy now is less. Okay you know, like you, - just little things make you happy now just the little, the little pleasures of a day. Because they're, because you've learned to appreciate that. And what makes you sad is a little different, also, because there's, you compare it to the deeper sad that that exists and so less makes you sad and more makes you happy. Does that make any sense?
- CM: Yes, I believe so.
- JH: Okay.
- **CM:** Um, so I have a fun follow up question to that: If the virus were to disappear tomorrow, what is the first thing you would do?
- JH: Oh, Such a fun question. Um, wow. That's that would be amazing. First of all, number one, I wouldn't believe it. Okay, so, because the skeptic in me is alive and well. But if it was truly happening, I think I would just have a big party. Just would invite, you know, and it

doesn't matter where I mean, yes, you know, when people say hop on a plane and go to, you know, where ever, all of that. But it almost doesn't matter. I would just have a party okay and relish the fact that invisible barrier that's between people now would be gone. It's just that would be just amazing.

- **CM:** Yeah. Yeah, me too Even though we can't see our friends and family the same way that we did before, do you still find them to be a source of comfort during this time?
- JH: Um, well, my immediate family, without a doubt. I mean we have hunkered down and now we're not all in under one roof. At one point we were for about a four-week period of time, which was really interesting. I have grown children. So it was really interesting. But it was kind of, there was something really special about it, being all together again and kind of living through this together, but we still stay extremely close. Yes, and I think we probably all use a lot more FaceTime and zoom and whatever now than we did before.
- CM: Um, what memory of this whole experience, do you think will stay with you the most?
- **JH:** Hum. I think that, it's the visuals. Okay? It's the mental pictures that will not go away. I mean, that's just there. So I've got, I've got different ones. I have ones when I worked at night and can see from my office window. I can see the atrium in in the main hospital and seeing it's set up like an ICU, I could actually see it from my window. And so looking at that in the dark and seeing people walking around like that and just...that's a visual that doesn't go away. The COVID unit for pediatrics, which was incredibly cramped and had all of the pumps and everything out in the hall with everybody completely, you know, unrecognizable and in their gear. That that picture never goes away. It's, it's, I think those are the big ones. Yeah.
- **CM:** Um, so I'll leave the rest open to you if you have anything you want to add that was not specifically addressed already.
- **JH:** Just a quick statement. I'm incredibly proud of Mount Sinai. I can't, I can't believe how this hospital, hospital system, did what they did. You know, you see other places now and it's devastating, around the country. But, you know, it was very devastating here. But somehow it rolled along and people came together. I've worked at Mount Sinai for a long time and I have to say that it was one of their shining moments. They really ran it in a way that I don't think every hospital did, and it gave everybody a sense of security and a sense of feeling we were going to be okay. Not everybody was, but you knew that they were watching out for you, as opposed to just, you know, throwing you in there to work. So I think that's just, that, more than anything else, just incredibly amazed at how they ran this through a crisis like that.
- CM: l agree. l agree.
- **CM:** Well, that's it.
- JH: Okay. All right. I enjoyed it. Okay, I just wanted to put it in there, for the archives.

- **CM:** We greatly appreciate it. Thank you.
- **JH:** Okay. All right. All right, take care.
- CM: Bye.
- **JH:** Okay, bye-bye.

[END OF INTERVIEW]